PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 98 M 43 5

			(Column	PART		mn 2)		SMALL EI	YTITY		OTHER		
ТО	TAL CLAIMS		Toolailii		COIL	1111 2)		TYPE [OR •	SMALL	.	
FOI	OR		NUMBER FILED		AULUS S SVED			RATE	FEE		RATE	FEE	
TOTAL CHARGEABLE CLAIMS					NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	800	
			2 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		. 8			X\$ 9=		OR	X\$18=	144	
INDEPENDENT CLAIMS			Ø minus 3 =					X40=		OR	X80=		•
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	,	1	. 070	20/	
* If the difference in column 1 is less than zero, enter						"0" in column 2				OR		10	,
		LAIMS AS A						TOTAL		OR	TOTAL	1d 74	
		(Column 1)	WILITOL.	(Colur		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		İ
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	Arrive to	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
9	Total	*	Minus	**		-		X\$ 9=		OR	X\$18≃		
AME	Independent	•	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	ULTIPLE DEI	PENDENT	CLAIM					UH			
							L	+135=		OR	+270=	一、高級	-:
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS	The same of the	(Colur HIGH		(Column 3)						يجيا المواع المطور	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI-" TIONAL FEE	12
Q.	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=,⊹		7.
AME	Independent	*	Minus	***		=		X40=			X80=	jaki neriye.	İ.
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		╽┟		 -	OR	7.00-2		:
							L	+135=	7	OR	+270=		
							А	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
F	ENDERN SOM	(Column 1) CLAIMS	المناعلة للمنطب الاستاح	(Colun		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT	3cu-	HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	ŧ	Minus	••		=		X\$ 9=		00	X\$18=	7.6.6	
ME	Independent	•	Minus	• • •		=	1			OR			i I
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		-	X40=		OR	X80=		
• 14	the entrule and	mm d la la-a-a et com						+135=		OR	+270=		
16	the "Highest Nur	nn 1 is less than th mber Previously Pa mber Previously Pa	id For" IN THI	S SPACE is	less that	umn 3. 20. enter "20."		TOTAL DDIT. FEE		OR	TOTAL	inder gland	٠.